

MISSOURI DEPARTMENT OF HEALTH . STATE PUBLIC HEALTH LABORATORY

RECEIVED DHSS Breath Alcohol Program
By Carol Day at 1:59 pm, Sep 03, 2009

DATAMASTER MAINTENANCE REPORT

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.		
DATAMASTER SN 204083 127208	DATE OF INSPECTION OP-2709	
LOCATION OF INSTRUMENT (STREET AND CITY) Mississippi County Jail, Charleston, Missouri	TIME OF INSPECTION 0945	
CHECKLIST: Place a check (<) to the left of each item if foun	d to be satisfactory or if operating within established limits. (Write	
in observed values where determined.) Unchecked items must be corrected before using instrument.		
DIAGNOSTIC CHECK (PRINTOUT ATTACHED)		
COMPUTER	DETECTOR	
□ PROGRAM	[] FILTERS	
DHEATERS SAMPLE CHAMBER 49°C	☐ QUARTZ STANDARD	
☐ FLOW DETECTOR	CALIBRATION	
PUMP HIGH SPEED	PRINTER	
D INDICATOR LIGHTS		
TIME AND DATE		
□ SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 34 °C		
CALIBRATION CHECK -		
Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)		
☑ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE □ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)		
TEST 1 1096 TEST 2 1	. 096 TEST 3 096	
PERFORM R.F.I. TEST (PRINTOUT ATTACHED)		
NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)		
REFUSALS () (004) (.0509)	(.1014) (.1519) (Over .19) 2	
List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary) Guth Labs Lot Number 08360 Expiration Date 10~15-09 Concentration a 100		
REPLACED CHIP DISTRUMENT FUNCTIONS TO D.O. H. STANDARDS		
MODERATING RESIDER		
INSPECTING OFFICER	PRINT NAME	
TYPE II PERMIT NUMBER/EXPIRATION DATE	Greg D. Kenley	
820278 09-29-2010	(573) 840-9500	



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of 1 of Number 08340 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1211 percent (w/vol) ethyl alcohol. The expiration date for this lot number is October 15, 2009 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcoho and water used in this solution were free of test interfering substances.

.'ed L. Pauley, President

🏸 🗯 Face This Side Down – This Edge In First

BAC DataMasterEvidence Ticket

MISSOURI STATE HIGHWAY PATROL BAC DATAMASTER SERIAL NUMBER 204083 08/27/09 09:32

--- DIAGNOSTIC CHECK ---

OMPUTER:

OKAY

ROGRAM (04-07-2009):

OKAY

EATERS

AMPLE CHAMBER:

49c

LOW DETECTOR:

OKAY

UMP

IGH SPEED:

OKAY

ETECTOR:

OKAY

ILTERS:

OKAY

UARTZ STANDARD:

OKAY

ALIBRATION:

OKAY

PRINTER TEST

!"#\$%&^()*+,-./0123456789:;<=>?@ABCDEF6 |IJKLMMOPQRSTUVWXYZ[\]^_`abcdefghijklmno |qrstuvwxyz{|}}

r Signature On of C

CMSU 2208-02

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL BAC DATAMASTER SERIAL NUMBER 204083 08/27/09

ARREST TIME: 09:00

SUBJECT NAME:

TEST

DOB: 01/01/01

SEX: M

STATE/D.L.: MO/000 ARRESTING OFFICER:

KENLEY

OFFICER I.D.: 491

TESTING OFFICER:

KENLEY

OFFICER I.D.: 491

PERMIT NUMBER: 829278

EXPIRATION DATE: 09/29/10

MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature

Printed on recycled paper with agri-based inke

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Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL BAC DATAMASTER SERIAL NUMBER 204083 08/27/09

TESTING OFFICER:

KENLEY/G/D

OFFICER I.D.: 491

PERMIT NUMBER: 820278

EXPIRATION DATE: 09/29/10

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	09:41
INTERNAL STANDARD	YERIFIED	09:41
EXTERNAL STANDARD	.096	09:42
BLANK TEST	.000	09:42
EXTERNAL STANDARD	.096	09:43
BLANK TEST	.000	Ø9:43
EXTERNAL STANDARD	.096	09:44
BLANK TEST	.000	09:45

N = 3 |SIM. = .1 |AVG. = .096

Operator Signature

Printed on recycled paper with agri-based inks

CMSU 2208-02

State of Missouri DEPARTMENT OF HEALTH



PERMIT TYPE II



GREG D. KENLEY		
is he calibr	reby authorized to instruct ate, perform field repairs, and	and supervise operators, train instructors, inspect, d operate the following breath analyzer(s):
<i></i>	· DATAMA	ASTER
for the	e determination of the alcoho sued under the provisions of	lic content of blood from a sample of expired (alveolar) sections 577.020 through 577.041, RSMo 1986.
Date	09/29/08	John of Mathewson
	820278	Director of State Public Health Laboratory
Number	09/29/2010	\
MO 580-07	771 (7-88)	- Director, Department of Health